



RECEIVED

JAN 30 2004

Technology Center 2600

PATENT
Attorney Docket No. SNS-009B
(7268/15)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Jennings et al. CONFIRMATION NO: 9301
SERIAL NO.: 10/017,148 GROUP NO.: 2671
FILING DATE: December 14, 2001 EXAMINER: Nguyen, Kimbinh T.
TITLE: SYSTEMS AND METHODS FOR THREE DIMENSIONAL MODELING

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

THIRD SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with the provisions of 37 C.F.R. 1.97 and 1.98, Applicants hereby make of record the patents and publications listed on the accompanying Form PTO-1449, and other information contained herein, for consideration by the Examiner in connection with the examination of the above-identified patent application. Copies of the patents and publications are enclosed.

REMARKS

In accordance with the provisions of 37 C.F.R. 1.97, this statement is being filed (CHECK ONE):

- ☐ (1) within three (3) months of the **filing date** of a national application other than a continued prosecution application under 37 C.F.R. 1.53(d), or within three (3) months of the **date of entry of the national stage** as set forth in 37 C.F.R. 1.491 in an international application, or before the mailing of the **first Office action** on the merits, or before the mailing of a **first Office action** after the filing of a request for continued examination under 37 C.F.R. 1.114; or
- ☒ (2) after the period defined in (1) but before the mailing date of a **final action** or a **notice of allowance** under 37 C.F.R. 1.311, and
- ☐ the requisite Statement is below, **OR**
- ☒ the requisite fee under 37 C.F.R. 1.17(p), namely **\$180.00**, is included herein, or
- ☐ (3) after the mailing date of a **final action** or **notice of allowance** but before the payment of the **issue fee**, **AND**

- ☐ the requisite Statement is below, **AND**
- ☐ the requisite petition fee under 37 C.F.R. 1.17(p), namely **\$180.00** is included herein.


It is respectfully requested that each of the patents and publications listed on the attached Form PTO-1449, and other information contained herein, be made of record in this application.

STATEMENT

As required under 37 C.F.R. 1.97(e), Applicant(s), through the undersigned, hereby state either that

- ☐ 1. Each item of information contained in the Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application **not more than three months** prior to the filing of the Information Disclosure Statement; or
- ☐ 2. No item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing this Statement after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to **any individual** designated in 37 C.F.R. 1.56(c) **more than three months** prior to the filing of the Information Disclosure Statement.

Respectfully submitted,



William R. Haulbrook, Ph.D.

Attorney for Applicants

Testa, Hurwitz, & Thibeault, LLP

High Street Tower

125 High Street

Date: January 22, 2004
Reg. No. 53,002

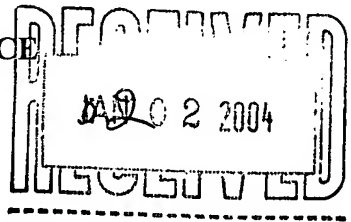
Tel. No.: (617) 310-8427
Fax No.: (617) 248-7100



PATENT
Attorney Docket No.: SNS-009B
(7268/15)

26714
\$ #7
02-02-04

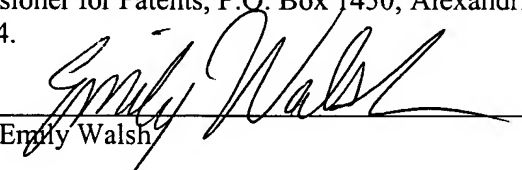
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



APPLICANT: Jennings et al. CONFIRMATION NO.: 9301
SERIAL NO.: 10/017,148 GROUP NO.: 2671
FILING DATE: December 14, 2001 EXAMINER: Nguyen, Kimbinh T.
TITLE: SYSTEMS AND METHODS FOR THREE DIMENSIONAL
MODELING

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 22nd day of January, 2004.


Emily Walsh

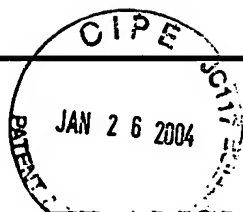
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

- 1.) Transmittal Form (1 pg.);
- 2.) Fee Transmittal Form (1 pg.);
- 3.) Copy of Fee Transmittal Form (1 pg.);
- 4.) Third Supplemental Information Disclosure Statement (2 pgs.);
- 5.) Form PTO-1449 (3 pgs.);
- 6.) Copies of IDS Citations A169-A175 and C69-C116;
- 7.) Check in the amount of \$180.00; and
- 8.) Return Receipt Postcard.

RECEIVED
JAN 30 2004
Technology Center 2600



TRANSMITTAL FORM

Application Serial Number	10/017,148
Filing Date	December 14, 2001
First Named Inventor	Jennings et al.
Group Art Unit	2671
Examiner Name	Nguyen, Kimbinh T.
Attorney Docket No.	SNS-009B
Patent No.	Not applicable
Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input checked="" type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input type="checkbox"/> Petition for Extension of Time <input checked="" type="checkbox"/> Third Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations (A169-A175 & C69-C116) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below) <div style="text-align: center;">RECEIVED JAN 30 2004 Technology Center 2600</div>
---	---	--

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

SIGNATURE BLOCK

Respectfully submitted,

William R. Haulbrook, Ph.D.
Attorney for Applicants
Testa, Hurwitz & Thibault, LLP
High Street Tower
125 High Street
Boston, MA 02110

Date: January 22, 2004
Reg. No.: 53,002
Tel. No.: (617) 310-8427
Fax No.: (617) 248-7100

<div style="border: 2px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> CIP FEE TRANSMITTAL JAN 26 2004 </div>	Complete if Known		RECEIVED
	Application Serial Number	10/017,148	
	Filing Date	December 14, 2001	
	First Named Inventor	Jennings et al.	
	Group Art Unit	2671	
	Examiner Name	Nguyen, Kimbinh T.	
Attorney Docket No.	SNS-009B	JAN 30 2004	Technology Center 2600

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																				
<p>1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p>2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.</p> <p>3. <input checked="" type="checkbox"/> Applicant claims small entity status.</p>	<p>3. ADDITIONAL FEES</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee (\$)</th> <th style="text-align: left;">Small Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>420</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>950</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1480</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>2010</td><td>1005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>330</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>330</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>290</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td>\$ 180.00</td></tr> <tr><td>770</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>770</td><td>385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>110</td><td>55</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> </tbody> </table> <p style="text-align: right; margin-top: 10px;">SUBTOTAL (3) (\$ 180.00)</p>	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		420	210	Extension for reply within second month		950	475	Extension for reply within third month		1480	740	Extension for reply within fourth month		2010	1005	Extension for reply within fifth month		330	165	Notice of Appeal		330	165	Filing a brief in support of an appeal		290	145	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement	\$ 180.00	770	385	Filing a submission after final rejection (37 CFR 1.129(a))		770	385	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		110	55	Submission of Terminal Disclaimer		Other fee (Specify)				Other fee (Specify)			
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																		
130	65	Surcharge - late filing fee or oath																																																																																			
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																			
130	130	Non-English specification																																																																																			
2,520	2,520	Request for ex parte reexamination																																																																																			
110	55	Extension for reply within first month																																																																																			
420	210	Extension for reply within second month																																																																																			
950	475	Extension for reply within third month																																																																																			
1480	740	Extension for reply within fourth month																																																																																			
2010	1005	Extension for reply within fifth month																																																																																			
330	165	Notice of Appeal																																																																																			
330	165	Filing a brief in support of an appeal																																																																																			
290	145	Request for oral hearing																																																																																			
130	130	Petitions to the Commissioner																																																																																			
180	180	Submission of Information Disclosure Statement	\$ 180.00																																																																																		
770	385	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																			
770	385	For each additional invention to be examined (37 CFR 1.129(b))																																																																																			
100	100	Certificate of Correction for applicant's error																																																																																			
110	55	Submission of Terminal Disclaimer																																																																																			
Other fee (Specify)																																																																																					
Other fee (Specify)																																																																																					
<p>FEE CALCULATION</p> <p>1. FILING FEE</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>770</td><td>Utility filing fee</td><td></td></tr> <tr><td>340</td><td>Design filing fee</td><td></td></tr> <tr><td>160</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Number Filed</th> <th style="text-align: left;">Number Extra</th> <th style="text-align: left;">Rate</th> <th style="text-align: left;">Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims - 20 =</td> <td></td> <td>x \$ 18.00 =</td> <td></td> </tr> <tr> <td>Independent Claims - 3 =</td> <td></td> <td>x \$ 86.00 =</td> <td></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Multiple Dependent Claim(s), if any</td> <td>\$290.00 =</td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL:</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td></td> </tr> <tr> <td colspan="3">SUBTOTAL (1)</td> <td>(\$ 0)</td> </tr> </tbody> </table> <p>2. AMENDMENT CLAIM FEES</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Claims Remaining After Amend.</th> <th style="text-align: left;">Highest No. Previously Paid For</th> <th style="text-align: left;">Present Extra</th> <th style="text-align: left;">Rate</th> <th style="text-align: left;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total -</td> <td>=</td> <td></td> <td>x \$ 18.00 =</td> <td></td> </tr> <tr> <td>Indep. -</td> <td>=</td> <td></td> <td>x \$ 86.00 =</td> <td></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td> <td>+ \$290.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td>(\$)</td> </tr> <tr> <td colspan="4" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td>(\$)</td> </tr> <tr> <td colspan="4">SUBTOTAL (2)</td> <td>(\$ 0)</td> </tr> </tbody> </table>	Large Entity Fee (\$)	Fee Description	Fee Paid	770	Utility filing fee		340	Design filing fee		160	Provisional filing fee		Number Filed	Number Extra	Rate	Amount	Total Claims - 20 =		x \$ 18.00 =		Independent Claims - 3 =		x \$ 86.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$290.00 =	TOTAL:				SMALL ENTITY DISCOUNT:				SUBTOTAL (1)			(\$ 0)	Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total -	=		x \$ 18.00 =		Indep. -	=		x \$ 86.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$290.00 =		TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)				(\$ 0)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 40%; text-align: right;"> SUBTOTAL (1) 0 SUBTOTAL (2) 0 SUBTOTAL (3) \$ 180.00 </td> </tr> <tr> <td colspan="2" style="text-align: right; margin-top: 10px;">TOTAL (\$ 180.00)</td> </tr> </table>		SUBTOTAL (1) 0 SUBTOTAL (2) 0 SUBTOTAL (3) \$ 180.00	TOTAL (\$ 180.00)						
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																			
770	Utility filing fee																																																																																				
340	Design filing fee																																																																																				
160	Provisional filing fee																																																																																				
Number Filed	Number Extra	Rate	Amount																																																																																		
Total Claims - 20 =		x \$ 18.00 =																																																																																			
Independent Claims - 3 =		x \$ 86.00 =																																																																																			
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$290.00 =																																																																																		
TOTAL:																																																																																					
SMALL ENTITY DISCOUNT:																																																																																					
SUBTOTAL (1)			(\$ 0)																																																																																		
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																	
Total -	=		x \$ 18.00 =																																																																																		
Indep. -	=		x \$ 86.00 =																																																																																		
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$290.00 =																																																																																		
TOTAL:				(\$)																																																																																	
SMALL ENTITY DISCOUNT:				(\$)																																																																																	
SUBTOTAL (2)				(\$ 0)																																																																																	
	SUBTOTAL (1) 0 SUBTOTAL (2) 0 SUBTOTAL (3) \$ 180.00																																																																																				
TOTAL (\$ 180.00)																																																																																					
<p>CORRESPONDENCE ADDRESS</p> <p>Direct all correspondence to:</p> <p style="margin-left: 40px;">Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100</p>	<p>SIGNATURE BLOCK</p> <p style="text-align: right;">Respectfully submitted,</p> <p style="text-align: center; margin-top: 10px;"> William R. Haulbrook, Ph.D. Attorney for the Applicant Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 </p> <p>Date: January 22, 2004 Reg. No.: 53,002 Tel. No.: (617) 310-8427 Fax No.: (617) 248-7100</p>																																																																																				

3009235